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Hinweise

Bei nachgewiesener Stammhirnerkrankung, endogenen Depressionen und organischen Hirnschäden (einschließlich Epilepsie) ist Vorsicht geboten.
Obwohl Semap bei Versuchstieren keine embryotoxische oder teratogene Wirkung hat, raten wir, die Substanz bei Schwangeren möglichst gar nicht anzuwenden, da eine Auswirkung auf die Nachkommenschaft beim Menschen noch nicht auszuschließen ist.
Die extrapyramidalen Begleitwirkungen gleichen qualitativ weitgehend denjenigen herkömmlicher starkpotenter Neuroleptika. Es handelt sich überwiegend um Initialreaktionen, die meistens 6 Stunden nach der Einnahme auftreten und innerhalb von 24 bis 48 Stunden wieder abklingen. Durch vorsichtige Dosierung oder Gabe von Antiparkinsonmitteln lassen sich diese Nebenwirkungen beherrschen.

Als eventuelle vegetative Nebensymptome können initial Müdigkeit, Speichelfluß, Schwitzen und Akkommodationsstörungen vorkommen, die jedoch mit fortschreitender Therapie zur spontanen Remission neigen und ebenfalls bis auf die initiale Müdigkeit gut auf Antiparkinsonmittel ansprechen.

Bisher hat sich kein Hinweis auf eine kardio- oder andere organotoxische Wirkung von Semap ergeben, dennoch ist es ratsam, bei chronisch Herzkranken die Herz-Kreislauf-Parameter aus Vorsichtsgründen in regelmäßigen Abständen zu kontrollieren.
Aus Sicherheitsgründen sollte eine leichte Potenzierung von Barbituraten und Opiaten in Betracht gezogen werden.
Semap kann bei bestimmungsgemäßem Gebrauch das Reaktionsvermögen so weit beeinträchtigen, daß es für den Straßenverkehr oder zur Bedienung von Kraftfahrzeugen oder Maschinen nicht mehr ausreicht; dies gilt in verstärktem Maße im Zusammenhang mit Alkoholgenuß.
Bei sorgfältiger Einstellung mit Semap kommen Kumulationseffekte selten vor.
Sie können durch Dosisreduktion oder Verlängerung des Intervalls vermieden werden.

Anwendung und Dosierung

Semap wird einmal pro Woche oral angewandt. Die Initialdosis beträgt 1/2-1 Tablette pro Woche. Die wöchentliche Erhaltungsdosis von Semap beträgt 1-3 Tabletten. Falls erforderlich, können auch höhere Dosen bis zu 6 Tabletten (pro Woche) verordnet werden. Die Umstellung auf Semap erfolgt einschleichend. Bei gleichmäßiger Reduzierung der anderen Neuroleptika erfolgt eine Steigerung der wöchentlichen Semap-Dosis bis zur optimalen Effektivität.
Das 4-fache der letzten Tagesdosis Haloperidol-Janssen entspricht etwa einer adäquaten Wochendosis Semap (bis 20 mg/die Haloperidol-Janssen).

Zusammensetzung

1 Tablette enthält 20 mg Penfluridol (R 16341).

Handelsformen und Preise

AVP incl. USt (Stand 11.75)

Originalpackungen
12 Tabletten
60 Tabletten

DM 30,45
DM 127,60

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